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STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from
John Doe dba Doe's Limo

Reedy River Taxi Leasing, LLC

BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

DOCKET

NUMBER: 2006 - 380 - T

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: John Bacot

Telephone: (864) 244-6683

Address: PO Box 2850
Greenville, SC 29602

Fax: (864) 233-9989

Other:

Email: j_bacot@yahoo.com

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

- ☐ Application - Class C Taxi
- ☐ Application - Class C Charter
- ☐ Application - Class C Charter Bus
- ☐ Application - Class C Non-Emergency
- ☐ Application - Class E Household Goods
- ☐ Application - Class E Hazardous Waste
- ☐ Application
- ☐ Request for Extension to Comply with Order
- ☐ Request for Order Granting Authority to Obtain Certificate of Public Convenience and Necessity to Be Rescinded
- ☐ Request for Cancellation of Certificate
- ☐ Request for Suspension
- ☐ Request for Reinstatement
- ☐ Request for Name Change on Certificate

- ☒ Request to Amend Scope of Authority
- ☐ Request to Amend Tariff (rate increase, etc.)
- ☐ Request to Amend Passenger Limit
- ☐ Request
- ☐ Exhibit
- ☐ Late-Filed Exhibit
- ☐ Letter
- ☐ Proposed Order
- ☐ Publisher's Affidavit
- ☐ Reservation Letter
- ☐ Response
- ☐ Return to Petition
- ☐ Other: _____

RECEIVED
MAR 18 2006
PSC
CLERK'S OFFICE

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

CLASS C AMENDMENT FORM

<p>File the original with:</p> <p>Public Service Commission of South Carolina Clerk's Office Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (803) 896 - 5100 FAX (803) 896-5199</p>	<p>Mail or fax a copy to:</p> <p>S.C. Office of Regulatory Staff Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815</p>
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DATE: March 18, 2014

I have the following Certificate:

☐ Class C Taxi # 7778 ☐ Class C Charter # ☐ Class C Charter Bus #

☐ Class C Non-Emergency # _____

Please consider this as my request for the following amendment(s) to my Certificate:

Name Change

From: _____ DBA: _____
(Current Name) (Current DBA if applicable)

TO: _____ DBA: _____
(New Name) (New DBA if applicable)

Scope of Authority

From: Greenville and Spartanburg Counties To: Statewide
(Current Scope) (New Scope)

Passenger Limit

From: _____ To: _____
(Current Limit Number) (New Limit Number)

Reedy River Taxi Leasing, LLC
Name & DBA if DBA is applicable)

Greenville, SC 29602

(City, State, Zip Code)

(864)244-6683

(Telephone Number)

PO Box 2850
(Street and/or Mailing Address)

(Signature)

Owner _____
(Title) Owner, President, etc.